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SEWALL'S PHRENOLOGY.

[Communicated for the Boston Medical and Surgical Journal.]

THIS work is composed of two lectures, originally delivered to the students of the Columbian College, District of Columbia.

The first lecture discusses the origin and progress of the science of phrenology. It dates the tendency towards the doctrines even as far back as the time of Aristotle, but awards to Drs. Gall and Spurzheim the meed of having reduced it to a science, and in its present perfect state of having presented it to their disciples. The general principles of the doctrines, and the claims of the advocates, are very briefly, and, we believe, clearly explained.

Although the object of the writer is not to inculcate these doctrines, still we believe, that, with the aid of the first plate contained in the work, there are few introductions to the science which give so clear and distinct an idea of them. Indeed, if a portion of it was left out, it might be recommended as an elementary work for new beginners in this science.

The second lecture embraces an examination into the anatomical structure and arrangement of the brain and other parts concerned in phrenology, to ascertain how far the science (so called) is reconcilable with anatomy, the only proper standard by which to ascertain its truth.

The writer alludes, in the following manner, to the various ways adopted for evading the objections to the doctrines, upon whatever grounds they may be based.

"If an individual has a large head and his mental manifestations are unusually powerful, the case is brought forward as a proof of the truth of phrenology; but if the manifestations are feeble, it is said that the great size of the head is the result of disease, or the brain is not well organized, or that other circumstances have exerted an influence in diminishing its power. If a small head is connected with a powerful intellect, it only proves that the brain, though small, is well organized and acts with uncommon energy. If an individual has a particular propensity strongly marked in his character, and there is no corresponding development of the brain, it is said that the organ has not been thrown out by indulging its desires; but if there is a large development of an organ, and no corresponding propensity, then it is contended that the germ of the propensity is there, but that it has been repressed by

education or other circumstances, or it is found that some counteracting organ is fully developed which neutralizes the first."

In the structure and organization of the brain, it is affirmed that there is nothing which will go to the support of the doctrine; but, on the contrary, much that will militate against it.

The convolutions, as none correspond to or represent any particular organ; the entire absence of any mark of distinction, upon dissection, between the different organs, either in the cortical or fibrous portion; the arrangement of the lateral ventricles, the corpus callosum, the fornix and other parts, direct the phrenologist to something more hypothetical than dissection for support. For the general reader the work is accompanied with two or three lithographic plates, illustrating the anatomy of the parts of the brain above alluded to.

In examining into the relation existing between the powers of the mind and the volume of the brain, it is pretty clearly shown that the advantage is not always on the part of him who possesses the largest head, either absolutely or relatively as to the size of his body. Some animals actually possess a larger amount of brain than man, while in others the relative portion of the brain with that of the body is also greater; hence the doctrine of man's superiority over animals, arising from his excess of brain, cannot be supported. In the supposition that there does exist a relation between the powers of mind and the size of the brain, there are many obstacles in the way of the use of the instruments invented for determining its size. To render them available, it is necessary to suppose that the parts exterior to, or covering the brain, are of uniform thickness. So far from this being the case, it is well known that even the same individual, in different ages, presents a marked difference, while persons of the same age, sex and condition present a great diversity in the thickness of the integuments and skull, of which we cannot judge during life. The plates, with the text, afford a very satisfactory illustration of this part of the subject. The difference of brain contained in two skulls of the same external dimensions, as ascertained by actual experiment, is greater than would be supposed even by those conversant with anatomy.

For practical purposes of determining the character of the intellect, the external prominences and depressions of the head are of the first importance to the phrenologist. If these means fail of enabling him to determine the degree of development of the different portions of the brain, and hence to ascertain the mental character, however correct may be the judgment, it is formed by other aid than that of craniology.

The first great obstacles that are presented in the way of ascertaining the development of some portions of the brain, are the frontal sinuses and the spaces that often occur between the two plates of the skull in different portions of the head. The protuberances which would lead the phrenologist to pronounce a man, while living, extraordinary for his development of certain portions of his brain, might be found, as in the individuals represented by the plates, more than commonly deficient in these very portions, consequent to the receding of the internal plate of the skull. The temporal muscle, as it varies in size in different

individuals, and frequently undergoes alterations in the same person, places also a number of organs beyond the reach of accurate observation.

The author contends, that for aught we know the brain is a unit, and the whole organ is concerned in each and every operation of the mind, and that persons are not to be considered powerful in intellect by the volume of the brain, but by its organization and activity. Persons have been known to lose considerable portions of the brain, even to the improvement of their minds. And during certain states of disease, men of ordinary intellect will sometimes present extraordinary manifestations; yet in these cases there is no augmentation in the size of the head, there is no addition of any new organ.

If the brain was composed of the different organs, as mapped out by phrenologists, the annals of surgery would afford, it is supposed, some well-authenticated cases, in the various mutilations of the brain, where the function of some one organ has been suspended, and the faculty destroyed corresponding to the organ which received the injury, while the others have remained unimpaired.

W.

ABSCESS OF THE LIVER—OPERATION—RECOVERY.

[Communicated for the Boston Medical and Surgical Journal.]

MR. H., aged 60, of intemperate habits, had been laboring under chronic hepatitis some years, attended with occasional attacks of dropsy. He was again attacked with the latter disease near the middle of February, 1836. The dropsical effusion seemed greatest in the abdominal cavity, which was enormously distended. Calomel purgatives were prescribed, followed by the infusion of digitalis in large doses. The latter remedy operated efficiently as a diuretic, and the abdominal swelling rapidly diminished. After the general intumescence had subsided, the right hypochondrium appeared unusually full and tender; tongue coated; obstinate constipation; slight rigors. Ordered a blister to be applied to the side, and calomel in alterative doses.

Notwithstanding these, with other remedies, were used, the disease steadily progressed—the swelling became more circumscribed, pointed and painful, attended with an obscure feeling of fluctuation. An incision was now made through the integuments into the cavity of the abscess. Nearly a gallon of sero-purulent fluid was discharged; that last discharged having all the sensible properties of bile. A severe rigor followed the operation, but soon passed off. The swelling immediately subsided. A broad band was carried around the body previous to the operation; this was gradually tightened, as the swelling diminished. The discharge, from the opening, continued a few days, and then ceased. Considerable constitutional irritation existed during the first week after the operation; this yielded to wine and quinine in moderately large doses. The patient, on his recovery, wholly abandoned the use of stimulants, and is now, Aug. 16th, in better health than he has been before for many years.

Taking into consideration the shock the system sustained by the

evacuation of so large a quantity of matter, I consider the exhibition of the wine and quinine during the period of constitutional derangement that followed, to have been a "sine qua non" to the recovery of the patient. The wine was given freely during the stage of depression, and had a decidedly beneficial effect. As this passed off, the amount given was gradually diminished, and it was wholly discontinued upon the closure of the external opening. The body band had also some influence on the favorable termination of the case, by compressing the parietes of the abscess, thus diminishing its capacity.

Hopkinton, N. H., Aug. 17th, 1837.

CHARLES A. SAVERY, M.D.

EMBRYOTIC INFLUENCES.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—With my annual subscription for the Journal, I send you a few remarks on "embryotic influences"—a subject that has found its way into your paper from the pen of Dr. Fish, followed by a criticism from Dr. Goulding. It is a subject of no great practical utility, but as a matter of curiosity is not void of interest; and perhaps its discussion may elicit, from some abler pen than mine, contributions of real importance to physiological science.

I have been much pleased with the communications from the combatants already in the field, on this subject, but should have been more so, had they manifested a temper and spirit more becoming sincere inquirers after truth. Irony and ridicule are powerful weapons with which to oppose an adversary, but very seldom elicit truth or promote the cause of science. Dr. G. offers one argument, and one only, against any baneful maternal influence upon the fœtus "in utero," viz. that no nervous connection exists between them, and consequently all the notions in our world in relation to this subject are better adapted to the dark ages, being founded in superstition and error. This mode of reasoning would better have answered the purpose of the writer, were he able to account for every phenomenon of nature on philosophical principles. But while common candor must compel him to admit that very many facts exist, without being thus explainable, it seems rather ungenerous to tax Dr. Fish so heavily on the score of his credulity. Nature, in all her operations, is guided by systematic and uniform laws, but still the connection between cause and effect is not always perceptible; or if the human mind is capable of comprehending and explaining this connection, it may not as yet be understood. Science is progressive, and many points are yet in darkness which we hope are destined to be illuminated by a meridian sun. And, further, there are "lusus naturæ," or events out of the ordinary course of nature, which are nevertheless dependent upon causes, though obscure and unintelligible.

The deleterious effect of this doctrine upon the *maternal* class of society, appears to me exaggerated by Dr. G., and made to assume a

greater air of importance than is in reality attached to it. This pretended effect is probably more than counterbalanced by the increase of kindness and unwonted tenderness on the part of the husband, which such a doctrine is calculated to produce.

A few cases have occurred within the limited sphere of my observation, which, I confess, have converted me from my former infidelity on this subject, and made me a believer in embryotic influences. My medical students, while engaged in the study of comparative anatomy, were in the practice of dissecting the eyes of the calf. One of the gentlemen alluded to carried an eye to his boarding house, and familiarly lectured to the family on its structure, physiology, diseases to which it is subject, &c. Among the admirers of its organization, was his sister, a married lady, then "enceinte" with her 2d child. The part of the eye which most excited her admiration, was the lens, which she took upon the point of a needle and examined with intense interest. No more was thought of the subject till after her confinement, when it was discovered that her infant had a cataract of both eyes.

CASE II.—Mrs. W., a lady of delicate structure and nervous temperament, while in a state of utero-gestation, attended upon a sick brother, and was present during his dying struggles, which were unusually severe and protracted. Her sympathies were excited excessively, and she evidently endured great mental agony and distress. In due time she was delivered of a full-grown child, which lived for several months, but appeared mentally imbecile, and had all the contortions of countenance and limbs which characterized his dying uncle in the hours of dissolution.

CASE III.—Mrs. H., in the early months of gestation, was frightened by a rattlesnake. At the usual period she was delivered of a son with a black zig-zag mark upon his back—the exact portrait of a snake, with all its characteristic features, with the exception of *animal life*.

CASE IV.—A full-grown fetus was exhibited to the Medical Society in this county as a specimen of *lusus naturæ*, by an individual, however, who knew little or nothing of its uterine history. The body and limbs were plump and perfect, and the only deformity appeared in the head and upper portions of the face, which was a perfect resemblance of a cat with a fractured skull and contused neck, which had suffered martyrdom for no other crime than being *supernumerary*. Now whether the mother had, or had not, been an eye-witness to such a brutal sacrifice, to me is unknown, but I confess I am unable to assign a more plausible cause. And that there was any real connection between the causes supposed and their results in the three former cases, admits, to be sure, of no positive proof; but if they do not stand in the relation of cause and effect, they were certainly extraordinary coincidences. And because we are unable to explain the *modus operandi*, are we to discredit maternal influence, and ascribe all to chance and accident?

When Dr. Goulding produces a more rational theory, I shall be pleased to adopt it. The gentleman may find some difficulty in explaining the process of impregnation! How is the heart of the embryo formed? On what principle does it act before the formation of the

nervous system? From whence does it derive its first blood? And from what source is the meconium furnished? These, with a thousand other phenomena of animal life, are known to exist, yet are difficult to explain in the present state of anatomical science.

Townsend, Vt., Aug. 17, 1837.

W. R. RANNEY, M.D.

MEDICAL BOTANY.

[Communicated for the Boston Medical and Surgical Journal.]

NO. VIII.—APOCYNUM. AMERICAN IPECAC.

SEX SYST. Class pentandria; order digynia. *Generic Characteristics.* *Calyx* very small, five-cleft, persistent. *Cor.* campanulate, with five short, revolute lobes. *Anth.* saggitate, connivent, cohering to the stigma by the middle. *Glands* five, acute, dentiform, alternating with the stamens.

There are four species of the apocynum found abundant in the New England States.

Specif. Descrip.—*Apocynum cannabinum.* Stem herbaceous, erect, branching, brownish, two or three feet high; leaves lanceolate, acute at each end, smooth; cymes paniculate, many flowered; corolla small, greenish, with an erect border and a tube not longer than the calyx.

It is found along fences and the borders of woods throughout the country. The root is the part used. It is perennial, creeping and brownish. It is a very valuable emetic and hydragogue cathartic, and, under certain circumstances, diuretic, diaphoretic, expectorant, emmenagogue and tonic. It is said by some to be an exceedingly valuable remedy in dropsy and in amenorrhœa. Several distinguished practitioners have given their testimony in its favor as a remedy for ascites and other forms of dropsy.—*Vid. U. S. Disp.*

Dr. Wood says, "It produces nausea, diminishes the frequency of the pulse, and appears to induce drowsiness, independently of the exhaustion consequent upon vomiting." I am led to believe it would be a useful agent, given in emetic doses, in many cases of hysteria attended with ascites. It probably possesses a small proportion of a narcotic principle. According to Dr. Knapp, who has analyzed it, it contains a bitter principle, extractive, tannin, gallic acid, resin, wax, caoutchouc, fecula, lignin, and an active emetic principle which he designates by the name of *apocynin*. The root, as well as the stem and leaves, contains a milky juice which readily concretes into a tenacious elastic substance, resembling caoutchouc. Dose for an emetico-cathartic, from fifteen to thirty grains of the powdered root. The decoction may be taken in two or three ounce doses, three times a day, as a diaphoretic and diuretic. Some practitioners make use of the species *androsæmifolium*, but it is said to be less active than the *cannabinum*. The different species are known to country people by the names of *ipêcac*, *bitter-root*, *dog's-bane*, *Indian-hemp*, &c. &c. Some of them have been used by the Indians in the treatment of *lues*

venerea, but with what success I am unable to say. There can be no doubt, however, that the apocynum is an article of great value as a remedy in many cases of disease, and which ought to be brought into general use. One species of it may be found at Kidder's, in Court street, Boston.

It is a fact worthy of consideration, that many inert or almost worthless substances are imported into this country, and kept at all the apothecary shops, while some of the most valuable indigenous plants of our own country can hardly be obtained, except in their native field or woods.

S. A. T.

NOTE.—Since writing "Medical Botany, No. 6," I have been informed by a physician from the country, that the *chelone glabra* is a very useful remedy in the treatment of dysentery. May not this quality depend on its astringent properties?

FINAL REPORT ON THE RADICAL CURE OF HERNIA,

BY THE COMMITTEE OF THE PHILADELPHIA MEDICAL SOCIETY.

To the Editor of the Boston Medical and Surgical Journal.

So great an interest has been manifested by our profession of late on the important subject of a radical cure of hernia, that I consider it due to the medical community that you lend your pages to give a wide circulation to the results to which the learned committee, above alluded to, have arrived, in the presentation of their final report. The report was read by Dr. R. Coates, who has devoted his active mind to the investigation of this subject, for a period hardly less than three years, and whose opinions may be considered as justly entitled to high regard. The report, entire, is in the August No. of the *American Journal of the Medical Sciences*. It gives a decided preference to the instruments of Dr. Chase. The committee report—

That since the date of their preliminary report (read Dec. 5th and 12th, 1835), they have devoted much time and thought to the important investigation submitted to their charge; but the numerous mooted questions originally involved with it, have been gradually narrowed down in number and compass, in three different ways; firstly, by the decision of several physiological points; secondly, by the results of the analysis of the mechanical construction of instruments; and thirdly, by the introduction of improvements in the formation of trusses, calculated to remove the objections waged against some portion of the apparatus represented as imperfect in the preliminary report.

In the eighth section of the preliminary report (Op. cit. p. 324) the committee ventured upon a physiological disquisition on the *modus operandi* of trusses, in producing the *apparently radical cure of hernia*; and their conclusion on this subject was presented in the following sentence.

"These positions will explain the motive of the committee in taking

the ground that the most perfectly retentive apparatus is that which offers the strongest probability of radical cure, and that any considerable irritation produced in the parts by the pressure of a block, may be considered, in the present state of the investigation, of secondary importance."—p. 326.

In the letter of the chairman to Dr. Heber Chase, the question of the *modus operandi* has been argued at greater length than would have been proper in a report designed to present a rigid detail of facts and established deductions; but the tenor of that letter, written after much more extended observation than had been offered when the report was read, adds collateral support to the present opinions of the committee, founded upon the whole of the evidence before them; namely, that the *radical cure of hernia*, by trusses, depends almost exclusively, if not entirely, upon the accuracy and permanency of the retention effected by the instrument. That considerable or long-continued irritation in the parts, so far from being an advantage, in reality opposes the successful treatment; that there are no facts in their possession which tend to prove indisputably that even slight irritations of the superficial tissues are transmitted to the tendons of the abdominal muscles in such a manner as to accelerate the cure; and that radical cures are sometimes effected without any other irritations than such as are altogether fugitive in character.

It will be remembered by the Society that the committee, in the preliminary report, expressed the decided opinion that "retentive power of solid blocks exceeds, *ceteris paribus*, by considerable difference, that of pads composed of softer materials."

The whole current of the evidence since presented to them most fully substantiates the correctness of this position, as the number of cases has been large in which the various instruments with soft pads have failed in effecting accurate and permanent retention, and in which the more perfect apparatus with blocks of proper form have been substituted with complete success.

The trusses with solid blocks, now in use or recommended by inventors, may be divided into two classes. 1st. Those which are constructed for the express purpose of producing irritation, in order to effect a condensation of the skin, cellular tissue, and the fascia superficialis or the abdominal tendons about the hernial orifice, into one common mass by adhesion. 2d. Those which are designed to secure the constant, perfect and safe retention of the bowel, without the attempt to create intentional irritation in the parts pressed by the instrument.

The remarks of the committee on the first of these classes, naturally arrange themselves under two heads. 1st. Comments upon the supposed establishment of adhesive inflammation; and 2d. An estimate of the retentive power of the apparatus.

First, then, on the establishment of adhesive inflammation by trusses of the first class. Your Committee have watched, with great caution and most minutely, the changes produced by the pressure of the truss-blocks in a number of cases; and the result of their observation may be

summed up as follows. The application of the instrument soon produces an erythematous blush of the integuments, which, when the pressure is severe, often continues for weeks or months; but, when mild from the first, or rendered so at a later period by the substitution of an instrument with a weaker spring, the redness of the skin changes its character, and appears, on the removal of the instrument, like that simple result of capillary distention which is witnessed immediately on the removal of a tight bandage, wherever it may have been applied; a distention obviously produced by diminished action of the arcuated fibres and coats of the vessels, the tonic contraction of which has been rendered unnecessary for a time by the substitution of a mechanical support, the capillaries being thus incapacitated for resisting completely the vis a tergo of the arterial circulation and the hydrodynamic pressure of the venous column. This cause being more permanent during the use of the truss than during that of almost any ordinary bandage, the consequences are also more durable; and this second kind of redness, or purpleness, is sometimes observable for many days after the removal of the instrument.

The first of these forms of redness is the obvious effect of the superficial irritation produced by the pressure of the block, and may be called, with some propriety, the primary redness; the second is seen even after the parts have become accustomed to the presence of the instrument, and we shall take the liberty of calling it the secondary redness.

The form of hyperemia observed in the primary redness is known to be favorable to adhesion, if the irritation be not sufficiently intense to produce decided inflammation; and even when inflammation does supervene, if the constitution of the patient be good, the inflamed part will be surrounded by cellular adhesions, or depositions usually so called, designed to limit its progress, according to a well-known physiological law.

The primary redness, during the use of the trusses of the first class, is often carried to such an excess as to produce decided inflammation, and sometimes even excoriation of the skin. (Case X.) It becomes, then, a question of considerable importance to decide whether the irritation of the block, or that produced by the inflammation which it sometimes causes, ever be transmitted to deeper seated parts so as to bring about adhesion between the cutis vera, the subcutaneous cellular tissue, and the fascia superficialis. The conclusion on this point will be stated presently.

The form of hyperemia as seen in the secondary redness, marks a condition of the vessels, which, instead of promoting adhesion, is well known to retard the formation of false membranes, while it promotes absorption to such a degree as frequently to determine the solution of such as are already formed, together with the interstitial deposits of tissues and sometimes even the tissues themselves.

If, then, these adhesions and condensations do occur, which are represented by the hypothesis as the cause of cure by these trusses, the evidence of their existence should be found during the continuance of

the primary redness, and cannot be supposed to *commence* at a later period, when the parts have become familiarized to the pressure of the instrument.

Immediately after the application of a truss of the first class, the subcutaneous fat beneath the block begins to disappear by absorption, especially at the part corresponding with the shoulder or most prominent part of the block. After the disappearance of the adeps, the block still continues to sink deeper and deeper, until, in fleshy persons, it appears to be almost embedded; and, on removing the instrument, the integuments present a mould of the block, nearly or quite complete. This condition is observed before the subsidence of the primary redness in some cases (Case XII.), and in others the parts may possibly become accustomed to the pressure before the depression of the integuments is so strongly marked; but in fact it has been observed in practice that active irritation of the skin is generally reproduced from time to time, being complicated with the secondary debility of the vessels already described; or, in other words, *the skin rarely becomes perfectly accustomed to the pressure of blocks of this class.*

The tenor of the specifications of the patents of Dr. Hood and Mr. Stagner (the only authorities on the subject known to the committee), induces us to believe that the authors of the hypothesis did not intend to carry the supposed condensation of the skin, cellular tissue and fascia superficialis beyond the point at which the above detailed appearances are observed; but that measures were then designed to be taken in order to lessen or control the amount of irritation produced by the instrument, either by the substitution of a less severe block, or by placing next the skin some layers of silk or other tissue to prevent the direct action of the wood. Your committee are therefore of opinion that it would not be quite consistent with impartial justice to include the *ulterior effects of the continued pressure of the blocks* in the investigation of the truth or falsity of the hypothesis. These ulterior effects will be mentioned hereafter; but the condition of the parts about the hernial orifice, or the abdominal canal, at the spot where the block presses, at the time when it is most deeply embedded, and during or after the highest irritation, is as follows:

The cutis vera, presenting one or the other form of redness above described, is sometimes thickened a little around the edges of the block, where a general puffiness of the integuments is occasionally observed. In some instances this thickening of the true skin is perceptible for a short distance beneath the more inclined, or inner and upper edge of Hood's inguinal block; but with all the instruments of this class which have been seen in use, the parts where the pressure is considerable, or, in other words, those which are nearest the hernial orifice *when the instrument is rightly applied*, are marked by no thickening of the skin; and, in some instances, that membrane is rendered obviously thinner than when in its normal condition, *even when the case has not advanced beyond the primary stage of irritation.*

The subcutaneous cellular tissue is found in every instance reduced in thickness by the obvious removal of the adeps, and by some process

producing still greater compression. The committee have seen no evidence whatever of the slightest thickening, either in the fascia superficialis, the abdominal tendons, or the edges of the external abdominal ring when that part has been acted on; and in all the cases the skin, where most closely approximated to the fascia, can be made to glide freely over it, when moved by the finger.

After the final removal of the truss, the parts thus flattened or impressed by the block, rapidly regain the general level of the abdomen. The cellular tissue receives anew its characteristic deposits, both within and beneath the cutis vera, and the adeps reappears. A few weeks are sufficient to effect this change; it is sometimes completed before the entire subsidence of the secondary redness, and it has been known to commence even under the pressure of the blocks of Dr. Chase's trusses.

Your committee feel compelled to regard these facts as conclusive against the truth of the doctrine, that the trusses or blocks of the first class produce a real condensation of, or adhesion between the skin, the subcutaneous cellular tissue, and the fascia superficialis or abdominal tendons.

If the depression were the result of a true condensation, it would be utterly impossible that the skin should retain, as it invariably does, its mobility upon the parts beneath. If adhesions actually took place, and the hypothesis which considers the cellular tissue as a membrane containing cells be true, the obliteration of those cells would render impossible the rapid reproduction of fat and the disappearance of the depression which has been described. If, on the contrary, that hypothesis be correct which represents the cellular tissue as a homogeneous mass, then the existence of adhesions between the cutis and the parts beneath could not permit the skin to rise again to its natural level until the accidental membranous connections were gradually elongated by mechanical or other forces; but the parts interested in the present case are not subject to any mechanical distending forces, in proof of which the committee will refer to the letter of the chairman already quoted; nor can it be supposed that interstitial deposition alone could occasion the necessary stretching of the adhesions within the time required; for this process is always slow and tedious, even under the action of very powerful forces, as is seen in the adhesions following inflammations of serous cavities. If any should believe it possible that the renewed interstitial deposits might elevate the skin to the natural level, the committee would merely suggest that these depositions could occur only in the intervals of the factitious membranes formed by the adhesions, and hence, that the skin thus elevated, would be inevitably rugose—a character totally inconsistent with the facts of the case. Moreover, we often witness similar depressions of the integuments among the effects of long-continued pressure by bandages and splints in surgical cases—as, for instance, over the tibia in ulcers of the inferior extremities—yet, in no case do we see the skin adherent to the parts beneath, unless in places where there has been an actual loss of substance or the establishment of the suppurative process.

Your committee, therefore, entertain decidedly the opinion that the hypothesis of condensation and adhesion is untenable.

The doctrine of adhesion and condensation being overthrown, there can remain but one mode of explaining the action of the instruments and their alleged claims as means of radical cure in hernia, viz.: Their mechanical influence in producing perfect retention of the bowel; for, whatever changes may occur in the hernial orifice while the instruments are applied, even granting that these changes ultimately render their further application unnecessary, can only be due to the exercise of the natural functions of the part affected, and have no further dependence on the instruments than such as results from their mechanical action in permanently removing the substances which were previously present from time to time in the false passages which constitute the disease.

The examination of the different instruments, and grounds of preference to that of Dr. Chase, will be given in another number.

BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, AUGUST 30, 1837.

STATE LUNATIC HOSPITAL REPORTS.*

THIS is precisely the kind of publication that has been needed: it is something in tangible form, having length, breadth and thickness enough to be visible in a book-case. We abhor the stitched-pamphlet system of reporting progress in public institutions, so common in this country. However valuable such annual papers may be to the community, at the time of their first appearance, they generally get converted into lamp-lighters at last. An air of bibliographical respectability is quite essential to the preservation of printed documents. Books, like fair, well-dressed ladies, command a degree of attention, from the mass of mankind, in proportion to the apparent value of their exterior, without reference to their intellectual qualities. There are many philosophers in rags, and many learned discourses so beggarly in appearance, that they never reach the altitude for which they were designed.

It is hardly necessary to be very definite in remarking upon the character of this series of reports, the spirit of which has already been given in our pages, as they appeared from year to year in the returns made to the Legislature. In the form now given them—a substantial, finely executed volume of two hundred pages, octavo—Dr. Woodward is enabled to converse with kindred establishments in Europe, in a more satisfactory manner than by a labored correspondence. Every line has an official accuracy about it, which imparts a peculiar interest, and enhances the

* Reports and other documents relating to the State Lunatic Hospital, at Worcester, Mass. Printed by order of the Senate. Boston: Dutton & Wentworth.

value of the whole in the estimation of those whose prayers are for the continual success of that heaven-blessed charity, which has for its object the comfort and happiness of the most wretched of the human family. The accompaniment of a correct lithographic view of the range of edifices constituting the hospital, together with a ground plan, enables the reader to understand the text, which, otherwise, would not be so clearly comprehended in speaking of different apartments.

Under the vigilant eye of Dr. Woodward, who possesses the moral qualifications for raising the hospital to great distinction, to say nothing of his well-known scientific attainments, every improvement is introduced which the experience of cotemporaries in similar establishments has discovered to be beneficial to the health and comfort of the reason-bereft inmates. It has been a happy circumstance that, from the beginning, the commissioners have been men of enlightened views, who never have hesitated to act with energy in any measure proposed by the superintendent which promised any advantages to the insane under treatment. The Legislature, too, in no instance have manifested a disposition to embarrass the operations of those who must know, from daily observation, what is most necessary. When the guardians of the treasury have been asked for assistance from the right source, they have given most cheerfully. Some of the acts of the last General Court in granting money for the purchase of land, completing the wings and erecting a chapel, are strong evidences of their confidence in the ability and integrity of those who control this admirable institution.

Before closing these remarks, we would suggest the propriety, if not expediency, of supplying every physician in the State with a copy of this volume of reports. If the measure were moved at the next session, it would probably meet with immediate encouragement.

Select Medical Library and Eclectic Journal of Medicine.—Perhaps we have been wanting in civility in not having recently called the attention of the profession to the sterling merits of Dr. Bell's Journal. There is discoverable in it an uncommon evidence of industry, and a devotion to the interests of medical science, which demand expressions of warm approbation. It is as difficult to select well, as it is to conduct any other department of editorial labor; and as Dr. Bell has evinced a good judgment in the republication of articles introduced into the Library, to say nothing of the original papers, together with items of foreign and domestic intelligence, his claim to patronage is certainly well established.

Philadelphia is not only distinguished for the excellence of its schools, but for its medical periodicals. Of the three now issued there, under the control of Dr. Hays, Dr. Dunglison and Dr. Bell, whose rank and influence are acknowledged wherever their writings have circulated, there is not one we could willingly relinquish. With these views we recommend the Select Library to all who are desirous of keeping pace with the medical science and literature of the age.

Medical Examinations.—Candidates for the degree of doctor in medicine, to be conferred this day at Harvard University, sustained a more than usually satisfactory examination. It was remarked by a gentleman

who is conversant with these trials, for such they are invariably regarded by those who pass the ordeal, that the public have an interest at stake in this finishing of medical students. When the talent and industry manifested before the board of examiners is such as to meet their warm approbation, as was the case the other day, the community cannot but be the gainers.

Somnambulism.—If some medical friend in the City of Providence will have the kindness to give us, in a condensed form, the particulars of the extraordinary cases of somnambulism now the talk and wonder of the day in that place, he will confer a peculiar favor on the profession. Admitting that one twentieth of what has been related to us by an intelligent gentleman who was in Providence the last week, is true, Dr. Poyen has been altogether eclipsed. Although we were long ago completely weary of the subject, supposing that nothing more strange and unaccountable could possibly be developed, than had already been presented by the believers in animal magnetism, the stories which are currently reported here of the astonishing exhibitions now being made in Rhode Island, demand a statement of all the facts.

Trepanning the Vertebral Column.—It is reported that Dr. Walker, of Charlestown, whose reputation as a surgeon is deservedly high, in an extraordinary dislocation of the neck, week before last, laid bare the cervical vertebræ at the point of injury, and after sawing away some of the processes, which exposed the sheath of the spinal marrow, restored the bones to their original places. The operation is said to have been a remarkable one. Will some one acquainted with all the circumstances, have the goodness to transmit the particulars?

Mammoth Tumor.—Dr. Hayward operated on a man, last week, at the General Hospital, who had a prodigiously large medullary tumor, exquisitely sensible, growing from the fascia of the recti muscles of the abdomen. Every stage of the dissection was attended with dreadful pain, even to the very last. However, notwithstanding an uncommon amount of suffering while under the knife, the patient has remained completely free from pain ever since, and is now rapidly convalescing. This, too, was a kind of case which should be given to the public.

Reinsertion of Human Teeth.—Dentists have been warned, of late, by the pernicious effects produced by the use of teeth taken from the dead, to abandon a practice now pretty extensively followed in the large cities. A dreadful and fatal case of venereal disease, in one instance, was in this way communicated to a lady, whose jaws and face presented a horrible spectacle before she found relief in death.

Plague Specific.—A man by the name of Brown, formerly of Boston, notorious for several qualities beside moral honesty, is endeavoring to find favor with the Turks—to whom he represents that he possesses a positive cure of the plague, which, next to Mahomedanism and their system of government, is the terror and curse of the land. The Sultan

must be careful, or he will be duped by a vagrant yankee, whose management of other people's money and divers acts of criminal freedom would send him to the State Prison, should he ever presume to set foot again in Massachusetts.

Visiting Cuba for Health.—Excellent preparations have been made near Matanzas for the accommodation of invalids from the United States. Formerly, the difficulty of procuring suitable lodgings prevented many from passing the winter in that beautiful island, who felt the necessity of fleeing from its boisterous approaches in New England. The place now organized with express reference to the convenience of this class of strangers, is located at San Pedro de Hudson, eighteen miles from Matanzas. Board ranges at about fourteen dollars a week. The keeping of a horse is ten dollars a month—the hire of one is thirty dollars per month. Steam boats leave Havana and Matanzas every other day—the fare being six dollars. Board, by the day, at either place, is two dollars and fifty cents. A horse costs from sixty-eight to one hundred and fifty dollars. Those who can afford the expense, should ship their own, the native breed being small and inferior. Invalids, to derive the most advantage from the mild air of Cuba, should leave here by the first of October and remain till May. Physicians, in recommending a voyage to their consumptive patients, should keep this circumstance in recollection.

Transylvania Medical School.—The chairs in this school vacated by the trustees have been refilled. Dr. Dudley has been reappointed Professor of Anatomy and Surgery, and Drs. Short and Richardson have also been reappointed to their former chairs; the former to the chair of *Materia Medica* and Botany, and the latter to that of Obstetrics and Diseases of Women and Children. Dr. J. C. Cross has been appointed to the chair of the Institutes of Medicine and Clinical Practice; Dr. J. Eberle to that of the Theory and Practice of Medicine, and Dr. T. D. Mitchell to that of Chemistry and Pharmacy. Dr. James M. Bush is adjunct Professor of Anatomy.—*Amer. Jour. of Med. Sciences.*

DIED.—At Milford, N. H., Hon. John Wallace, M.D., 56.—At Waltham, Mass. Dr. Isaac Mulliken, 85.—At Velasco, Texas, Dr. Alexander Lynch, surgeon in the Texan army, late of Petersburg, Va.—At Pittsburg, Penn., Dr. Richard R. Sayward, 28.

Whole number of deaths in Boston, for the week ending Aug. 26, 42. Males, 21—Females, 21.

Consumption, 6—palsy, 1—scarlatina, 1—cholera infantum, 3—dropsy on the brain, 1—ulcer in the stomach, 1—aneurism, 1—inflammation of the brain, 1—brain fever, 1—rupture of the uterus, 1—dysentery, 3—apoplexy, 1—inflammation of the uterus, 1—typhus fever, 1—old age, 1—sudden, 1—scarlet fever, 1—lung fever, 1—teething, 1.

MEDICAL INSTRUCTION.

THE subscribers have associated for the purpose of giving medical instruction. A convenient room has been provided for this purpose, which will be open to the students at all hours. They will have access to an extensive medical library, and every other necessary facility for the acquirement of a thorough medical education.

Opportunities will be offered for the observation of diseases and their treatment in two Dispensary districts, embracing Wards 1, 2 and 3, and in cases which will be treated at the room daily.

Instruction will be given by clinical and other lectures, and by examinations at least twice a week.

Sufficient attention will be paid to Practical Anatomy.

For further information, application may be made at the room, over 103 Hanover street, or to the subscribers.

EPHRAIM BUCK, M.D.
ASA B. SNOW, M.D.
E. WALTER LEACH, M.D.
HENRY G. CLARK, M.D.
JOSEPH MORIARTY, M.D.

Boston, August 9, 1837.

MEDICAL LECTURES IN THE CINCINNATI COLLEGE.

The session commences the last Monday of October, and ends the last day of February.

Special and Surgical Anatomy, by - - - Dr. M'DOWELL.
 General and Pathological Anatomy and Physiology, by - - - Dr. GEORGE.
 Surgery, by - - - Dr. PARKER.
 Obstetrics and the Diseases peculiar to Women and Children, by - - - Dr. RIVES.
 Chemistry and Medical Jurisprudence, by - - - Dr. ROGERS.
 Materia Medica and Pharmacy, by - - - Dr. HARRISON.
 Theory and Practice of Medicine, by - - - Dr. DRAKE.
 Dissections and Practical Anatomy, by - - - Dr. TRIMBLE.
 Clinical Instruction in the Cincinnati Hospital, by - - - Drs. DRAKE, PARKER and RIVES.
 Professor Parker, now in Europe for the purchase of additional books and apparatus, will return in October.

Dr. Trimble will open the rooms for Practical Anatomy on the 1st of October, and Prof. M'Dowell will at the same time commence a preliminary course of Osteology.

EXPENSES.—Tickets for the Professors, \$15 each; Matriculation, \$5; Library ticket (optional) \$3; Hospital ticket, \$5; Anatomical Rooms, \$10. Total, \$125. Respectable boarding and lodging can be had at \$3 a week.

As we have no national circulating medium, the Faculty consider it proper to give notice, that they will receive from students, at par, the current bank bills of the different States in which they respectively reside.

By order of the Faculty.

Aug 9—3t

J. B. ROGERS, Dean.

TO MEDICAL STUDENTS.

The undersigned are associated for the purpose of instructing in all the branches of Medicine and Surgery. A suitable room will be provided, and pupils will have the use of an extensive medical library, opportunities for seeing the practice of one of the districts of the Dispensary and of the Eye and Ear Infirmary, and of attending a course of lectures on the diseases of the eye.

A regular course of recitations and examinations will include all the required professional works.

Anatomical instruction and private dissection will form a prominent part in the study of the pupils. For further information, apply to either of the subscribers.

JOHN JEFFRIES, M.D.

R. W. HOOPER, M.D.

JOHN H. DIX, M.D.

Franklin Street, Nov. 9, 1836.

July 19—6m

MEDICAL SCHOOL OF HARVARD UNIVERSITY.

THE Medical Lectures in Harvard University will begin on the first Wednesday in November, in Mason street, Boston, at 9 o'clock, A. M., and continue thirteen weeks. For the following four weeks, the Hospital and Dissecting room will be kept open, and some Lectures will be given, without additional expense, to such students as may remain.

The following Courses of Lectures will be delivered to the class of the ensuing season.

	Fees.
Anatomy, and the Operations of Surgery, by JOHN C. WARREN, M.D.	\$15
Chemistry, by JOHN W. WEBSTER, M.D.	15
Midwifery and Medical Jurisprudence, by WALTER CHANNING, M.D.	10
Materia Medica and Clinical Medicine, by JACOB BIGELOW, M.D.	10
Principles of Surgery and Clinical Surgery, by GEO. HAYWARD, M.D.	10
Theory and Practice of Physic, by JOHN WARE, M.D.	15

By an additional act of the Legislature of Massachusetts, the opportunities for the study of Practical Anatomy are now placed upon the most liberal footing, and an ample supply of subjects for the wants of science will be legally provided at a small expense.

The Massachusetts General Hospital is open without fee to students attending the Lectures of the physicians and surgeons. Clinical Lectures are given several times in each week, and surgical operations are frequent.

To the Medical College is attached a Medical Library, a costly and extensive Chemical Apparatus, and Collections illustrative of Midwifery, Materia Medica, and Healthy and Morbid Anatomy.

WALTER CHANNING

Dean of the Faculty of Medicine.

Boston, July 5, 1837.

tNov. 1.

PROLAPSUS UTERI CURED BY EXTERNAL APPLICATION.

DR. A. G. HULL'S UTERO-ABDOMINAL SUPPORTER is offered to those afflicted with *Prolapsus Uteri*, and other diseases depending upon relaxation of the abdominal muscles, as an instrument in every way calculated for relief and permanent restoration to health. When this instrument is carefully and properly fitted to the form of the patient, it invariably affords the most immediate immunity from the distressing "dragging and bearing down" sensations which accompany nearly all visceral displacements of the abdomen, and its skilful application is always followed by an early confession of radical relief from the patient herself. The Supporter is of simple construction, and can be applied by the patient without further aid. Within the last two years 700 of the Utero-Abdominal Supporters have been applied with the most happy results.

The very great success which this instrument has met, warrants the assertion, that its examination by the Physician will induce him to discard the disgusting pessary hitherto in use. It is gratifying to state, that it has met the decided approbation of every member of the Medical Faculty who has applied it, as well as every patient who has worn it.

The Subscribers having been appointed agents for the sale of the above instruments, all orders addressed to them will be promptly attended to. Price, \$10.

LOWE & REED, Boston; DAVID KIMBALL, Portsmouth, N. H.; JOSHUA DUBOIN, Portland, Me.; JOSEPH BALCH, JR. Providence, R. I.; ELISHA EDWARDS, Springfield, Mass.; N. S. WORDEN, Bridgeport, Conn. May 10—6m

THE BOSTON MEDICAL AND SURGICAL JOURNAL is published every Wednesday, by D. CLAPP, JR. at 184 Washington Street, corner of Franklin Street, to whom all communications must be addressed, *post-paid*. It is also published in Monthly Parts, each Part containing the weekly numbers of the preceding month, stitched in a cover. J. V. C. SMITH, M.D. Editor.—Price \$3.00 a year in advance, \$3.50 after three months, and \$4.00 if not paid within the year.—Agents allowed every seventh copy *gratis*.—Orders from a distance must be accompanied by payment in advance, or satisfactory reference.—Postage the same as for a Newspaper.